

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Gallo, Sheri

14 ACCOUNT # (Ethics Commission filers)
00110414

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME
Austin Apartment Association PAC

GENERAL

COMMITTEE ADDRESS
8620 Burnet Road
475
Austin, TX 78757

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME
Arrona, Kristan

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS
8620 Burnet Road
475
Austin, TX 78757

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 70,330.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 46,881.08

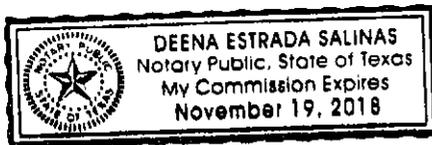
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 36,462.83

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

17 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Sheri Gallo

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sheri Gallo, this the 21st day of December, 2014, to certify which, witness my hand and seal of office.

Deena Estrada Salinas
Signature of officer administering oath

Deena Estrada-Salinas
Print name of officer administering oath

Notary Public
Title of officer administering oath

**CANDIDATE / OFFICEHOLDER REPORT:
NOTICE FROM POLITICAL COMMITTEE(S)**

**FORM C/OH
ADDENDUM**

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C/OH NAME Gallo, Sheri

ACCOUNT # (Ethics Commission filers)
00110414

**17 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

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COMMITTEE TYPE

COMMITTEE NAME Home Builders Association of Greater Austin Home PAC Personal

GENERAL

COMMITTEE ADDRESS 8140 Exchange Drive
Austin, TX 78754

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME Savio, Harry

COMMITTEE CAMPAIGN TREASURER ADDRESS 8140 Exchange Drive
Austin, TX 78754

**NOTICE
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COMMITTEE TYPE

COMMITTEE NAME Home Builders Association of Greater Austin Home PAC Corporate

GENERAL

COMMITTEE ADDRESS 8140 Exchange Drive
Austin, TX 78754

SPECIFIC

COMMITTEE CAMPAIGN TRCASURER NAME Savio, Harry

COMMITTEE CAMPAIGN TREASURER ADDRESS 8140 Exchange Drive
Austin, TX 78754

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/64 Report: 4/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allman, Kay 6 Contributor address; City; State; Zip Code 3100 Rivercrest Avenue Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 11/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Joe Contributor address; City; State; Zip Code 1707 Stamford Lane Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self			
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andrews, B.J. Contributor address; City; State; Zip Code 4200 Jackson Avenue Apt. 1015 Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) N/A			
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Apartment Association PAC Committee Contributor address; City; State; Zip Code 4107 Medical Parkway #100 Austin, TX 78756	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bacon, Stanley Contributor address; City; State; Zip Code 7627 Rockpoint Drive Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 3/64 Report: 6/83	
2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beebe, Bill	7 Amount of contribution (\$) \$100.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 10702 Bayridge Cove Austin, TX 78759		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 11/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beckworth, Laura	Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 98 San Jacinto Blvd. FSR-1 #2705 Austin, TX 78701		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) VP			Employer (See Instructions) Hobby Communications, LLC	
Date 11/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bentzin, Ben	Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4603 Island Cove Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bergstrom, Alan	Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4505 Spicewood Springs Road Suite 104 Austin, TX 78759		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Financial Consultant			Employer (See Instructions) Eagle Service Group	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bernard, Casey	Amount of contribution (\$) \$125.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7140 Chimney Corners Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/64 Report: 7/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bernard, James 6 Contributor address; City; State; Zip Code 7140 Chimney Corners Austin, TX 78731	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bland, Joe Contributor address; City; State; Zip Code 5511 Lands End Austin, TX 78734	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Joe Bland Construction	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boon, Jim Contributor address; City; State; Zip Code 5701 Scout Island Cove Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Borgelt, Roger Contributor address; City; State; Zip Code 106 Laurel Lane Austin, TX 78705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Borgelt Law	
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bostick, Francis Helen Contributor address; City; State; Zip Code 4700 Cat Mountain Drive Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/64 Report: 8/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boykin, Cue 6 Contributor address; City; State; Zip Code 3621 Windsor Road Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boykin, Dorothy Contributor address; City; State; Zip Code 3621 Windsor Road Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brandes, Robert Contributor address; City; State; Zip Code 312 W. Austin Street Fredericksburg, TX 78624	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brandes, Robert Contributor address; City; State; Zip Code 312 W. Austin Street Fredericksburg, TX 78624	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brandon, Jack L. Contributor address; City; State; Zip Code 7214 Chimney Corners Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brandon, Jayne 6 Contributor address; City; State; Zip Code 7214 Chimney Corners Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bray, Judy Contributor address; City; State; Zip Code #2 Greens Lane Austin, TX 78703	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bray, Judy Contributor address; City; State; Zip Code 401 Congress Avenue Austin, TX 78767	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bray, Terry Contributor address; City; State; Zip Code #2 Greens Lane Austin, TX 78703	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Graves, Dougherty, Hearon, & Moody	
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bray, Terry Contributor address; City; State; Zip Code 401 Congress Avenue Austin, TX 78767	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Graves, Dougherty, Hearon, & Moody	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/64 Report: 10/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Breed, Ann H. 6 Contributor address; City; State; Zip Code 4405 Deepwoods Austin, TX 78731	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Breland, O.Philip Jr. Contributor address; City; State; Zip Code 1516 Parkway Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brigham, Charlotte Contributor address; City; State; Zip Code 7800 Ginkgo Cove Austin, TX 78750	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brink, Rhonda H. Contributor address; City; State; Zip Code 5002 Lynnwood Street Unit B Austin, TX 78756	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, J. Tim Contributor address; City; State; Zip Code 2201 B Exposition Blvd. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/64 Report: 11/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Lynda 6 Contributor address; City; State; Zip Code 2201 B Exposition Blvd. Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 11/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Buffington, Blake Contributor address; City; State; Zip Code 6100 Northern Dancer Drive Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Buffington Capital Holdings	
Date 11/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burbridge, Hank Contributor address; City; State; Zip Code 7202 Smokey Hill Road Austin, TX 78736	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) Signs
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ampro Productions	
Date 11/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burbridge, Maria Contributor address; City; State; Zip Code 7202 Smokey Hill Road Austin, TX 78736	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) Signs
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ampro Productions	
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burdette, Carol Contributor address; City; State; Zip Code 3009 Gilbert Street Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Gottesman Residential	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/64 Report: 12/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burdette, Milo 6 Contributor address; City; State; Zip Code 3009 Gilbert Street Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See Instructions) Barshop & Oles	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bury, Paul Contributor address; City; State; Zip Code 221 W. 6th Street Suite 600 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Bury & Partners, Inc.	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Ernest Contributor address; City; State; Zip Code 7601 Rustling Road Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Sarah Contributor address; City; State; Zip Code 7601 Rustling Road Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Caffrey, Jeffry Contributor address; City; State; Zip Code 6417 Wallace Cove Austin, TX 78750	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) First State Bank	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 10/64 Report: 13/83	
2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cantwell, Cindy	7 Amount of contribution (\$) \$50.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4215 Venado Drive Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cantwell, John	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4215 Venado Drive Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Cantwell Company		
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Caskey, Kathy G.	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 7313 Creekbluff Drive Austin, TX 78750		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cheng, Ronald	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3407 Greystone Drive Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions) Chinatown Restaurant		
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christian, Elizabeth	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 7629 Rockpoint Drive Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Elizabeth Christian & Associates Public Relations, Inc.		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/64 Report: 14/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cihock, Michael 6 Contributor address; City; State; Zip Code 5310 Musket Ridge Austin, TX 78759	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) McLean & Howard, LLP	
Date 11/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Kelley Contributor address; City; State; Zip Code 6201 River Place Blvd # 1 Austin, TX 78730	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Relationship Manager		Employer (See Instructions) Self	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooper, Marjorie Ann Contributor address; City; State; Zip Code 1910 Breman Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooper, Michael Contributor address; City; State; Zip Code 1910 Breman Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coronado, Dawn Contributor address; City; State; Zip Code 5602 Palisade Court Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/64 Report: 15/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cotner, Douglas 6 Contributor address; City; State; Zip Code 4101 Pinehurst Drive Taylor, TX 76574	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crawford, Keith Contributor address; City; State; Zip Code 4902 Tenison Court Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Concrete Plumbing		Employer (See Instructions) Capital Pumping, LP	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowley, Carol Contributor address; City; State; Zip Code 5902 Lonesome Valley Trail Austin, TX 78731	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowley, Tim Contributor address; City; State; Zip Code 5902 Lonesome Valley Trail Austin, TX 78731	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cullick, Robert Contributor address; City; State; Zip Code 3705 Laurel Ledge Lane Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) Austin Energy	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/64 Report: 16/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cullick, Robert 6 Contributor address; City; State; Zip Code 3705 Laurel Ledge Lane Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Communications		10 Employer (See Instructions) Austin Energy	
Date 12/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curlee, Susan Contributor address; City; State; Zip Code 4121 Mek Drive Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dagleish, David (Mrs.) Contributor address; City; State; Zip Code 4019 Spicewood Springs Road Austin, TX 78759	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dagleish, David Contributor address; City; State; Zip Code 4019 Spicewood Springs Road Austin, TX 78759	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Dagleish Construction	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daugherty, Charlyn Contributor address; City; State; Zip Code 1403 Club Ridge Cove Austin, TX 78735	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/64 Report: 17/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daugherty, Gerald T. 6 Contributor address; City; State; Zip Code 1403 Club Ridge Cove Austin, TX 78735	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) County Commissioner		10 Employer (See Instructions) Travis County	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Mark Contributor address; City; State; Zip Code 2404 Sweetbrush Drive Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Rebecca Nelson Contributor address; City; State; Zip Code 2404 Sweetbrush Drive Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daywood, Jim Contributor address; City; State; Zip Code 5003 Westview Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Capitol Vending and Coffee	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daywood, Melissa Contributor address; City; State; Zip Code 5003 Westview Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Capitol Vending and Coffee	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/64 Report: 19/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dunworth, Laura 6 Contributor address; City; State; Zip Code 302 Inwood Road Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dwyer, Jan Cox Contributor address; City; State; Zip Code 503 Las Lomas Drive Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eledge, Michael Ray Contributor address; City; State; Zip Code 3705-A Gilbert Street Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President/Real Estate		Employer (See Instructions) Whitney Group	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eledge, Michael Ray Contributor address; City; State; Zip Code 3705-A Gilbert Street Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eledge, Ruth Ann Contributor address; City; State; Zip Code 3705-A Gilbert Street Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/64 Report: 20/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eledge, Ruth Ann 6 Contributor address; City; State; Zip Code 3705-A Gilbert Street Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Self	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliott, Andy Jr. Contributor address; City; State; Zip Code 5000 Mission Oak Blvd. # 63 Austin, TX 78735	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliott, Jim Contributor address; City; State; Zip Code 4105 Medical Parkway Austin, TX 78756	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliott, Wanda Contributor address; City; State; Zip Code 4105 Medical Parkway Austin, TX 78756	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellis, Amy Contributor address; City; State; Zip Code 4408 Long Champ # 10 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellis, Christopher <hr/> 6 Contributor address; City; State; Zip Code 4408 Long Champ # 10 Austin, TX 78701	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See Instructions) Endeavor	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Enoch, Craig <hr/> Contributor address; City; State; Zip Code 2614 Maria Anna Road Austin, TX 78703	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Enoch Keever	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erthal, Carmen <hr/> Contributor address; City; State; Zip Code 3521 Fawn Creek Path Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erthal, David <hr/> Contributor address; City; State; Zip Code 3521 Fawn Creek Path Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fairey, Judith <hr/> Contributor address; City; State; Zip Code 2500 Barton Creek Blvd Apt. 3205 Austin, TX 78735	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Farmer, Gary 6 Contributor address; City; State; Zip Code 309 Lake Cliff Trail Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) President		10 Employer (See Instructions) Heritage Title Company of Austin, Inc.	
4 Date 11/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Finney, Julia 6 Contributor address; City; State; Zip Code PO Box 2519 Austin, TX 78768	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 12/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fleming, Eddie 6 Contributor address; City; State; Zip Code PO Box 303414 Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See Instructions) Self	
4 Date 11/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flieller, James 6 Contributor address; City; State; Zip Code 3129 Honey Tree Lane Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) CPA		10 Employer (See Instructions) Flieller, Kruger, Skelton, & Plyler, PLLC	
4 Date 11/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flieller, Jane 6 Contributor address; City; State; Zip Code 3129 Honey Tree Lane Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) CPA		10 Employer (See Instructions) Self	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/64 Report: 23/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Follett, Bernice 6 Contributor address; City; State; Zip Code Box 1717095 Sioux Falls, SD 57186	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Follett, Brian Contributor address; City; State; Zip Code Box 1717095 Sioux Falls, SD 57186	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frachtman, Robert I. MD Contributor address; City; State; Zip Code 5400 Hurlock Drive Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Franklin, Tessa Contributor address; City; State; Zip Code 23704 Replica Road Spicewood, TX 78669	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frey, Jerry Contributor address; City; State; Zip Code 100 Congress Avenue Suite 500 Austin, TX 78701	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) CBRE, Inc.	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/64 Report: 24/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fudman, Edward 6 Contributor address; City; State; Zip Code 5910 Doone Valley Court Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 10/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gallo, Anthony Contributor address; City; State; Zip Code PO Box 26550 Austin, TX 78755	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) IT Director		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions) PECU			
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gallo, Catherine Contributor address; City; State; Zip Code 2202 Enfield # 202 Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Broadcaster		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions) KEYE			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garrett, Kathleen Contributor address; City; State; Zip Code 8312 Adirondack Trail Austin, TX 78759	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gellman, Steve Contributor address; City; State; Zip Code 5327 Valburn Austin, TX 78731	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			

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2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gerst, Bess	7 Amount of contribution (\$) \$30.00	8 In-kind contribution description (if applicable)		
6 Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt 439 Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbs, Eva Gayle Jr.	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 2710 Maria Anna Road Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbs, George D. Jr.	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 2710 Maria Anna Road Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibson, Paige	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 7708 San Felipe Blvd. # 60 Austin, TX 78729		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 11/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gilmore, Brian	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 5710 Trailridge Drive Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Investment Banking			Employer (See Instructions) Westlake Securities		

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2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414		
4 Date 11/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gladden, Linda	6 Contributor address; City; State; Zip Code 2702 W 35th Street Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 11/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goldman, Adam	Contributor address; City; State; Zip Code 1901 Hill Oaks Court Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 11/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goldman, Jennifer	Contributor address; City; State; Zip Code 1901 Hill Oaks Court Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gottesman, Laura	Contributor address; City; State; Zip Code 1501 Enfield Road Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gottesman, Morris	Contributor address; City; State; Zip Code 1501 Enfield Road Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Beth 6 Contributor address; City; State; Zip Code 2612 Wooldridge Drive Austin, TX 78703	7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Investments		10 Employer (See Instructions) Self	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Tom Contributor address; City; State; Zip Code 2612 Wooldridge Drive Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Midwikis & Granger PC	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gray, John H. Jr. Contributor address; City; State; Zip Code 4002 Hyridge Austin, TX 78759	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Patricia B. Contributor address; City; State; Zip Code 4107 Medical Parkway Suite 102 Austin, TX 78756	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Certified Public Accountant		Employer (See Instructions) Patricia B. Green, CPA	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greening, John Contributor address; City; State; Zip Code 6900 Ligustrum Cove Austin, TX 78750	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions) AccelaVue	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haden, Noble 6 Contributor address; City; State; Zip Code 509 Short Circuit # 201 Horseshoe Bay, TX 78657	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hall, Winifred T. Contributor address; City; State; Zip Code 1620 Northumberland Road Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Fred Contributor address; City; State; Zip Code 5816 Trailridge Drive Austin, TX 78731	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Gayle B. Contributor address; City; State; Zip Code 5816 Trailridge Drive Austin, TX 78731	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardeman, Bryan Contributor address; City; State; Zip Code 2711 Scenic Drive Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/64 Report: 29/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardeman, Genny 6 Contributor address; City; State; Zip Code 2101 Matthews Drive Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Sales		10 Employer (See Instructions) Continental Automotive Group	
Date 11/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardeman, Joy Contributor address; City; State; Zip Code 3610 Bridle Path Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Research Analyst		Employer (See Instructions) NRSC	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardeman, Rebecca Contributor address; City; State; Zip Code 2711 Scenic Drive Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Edgar Contributor address; City; State; Zip Code 5100 Ridge Oak Drive Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, John Contributor address; City; State; Zip Code 3704 Cherry Lane Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Austin Blue Sky Investments	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Pat 6 Contributor address; City; State; Zip Code 5100 Ridge Oak Drive Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Susan Contributor address; City; State; Zip Code 3704 Cherry Lane Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Site Solutions			
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hayden, Noble Contributor address; City; State; Zip Code 509 Short Circuit # 201 Horseshoe Bay, TX 78657	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 11/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Head, Ray Contributor address; City; State; Zip Code 7502 Downridge Drive Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heidrick, Clarke Contributor address; City; State; Zip Code 3702 Eastledge Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Hiedrick, Graves, Daugherty, Hearon, & Moody			

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2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hendrix, Scott	7 Amount of contribution (\$) \$50.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5610 Bonnell Vista Street Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hicks, Donna	Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1703 W. 5th Street Suite 800 Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Co-Owner			Employer (See Instructions) Stockton Hicks Laffey	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hicks, Steven	Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1703 W. 5th Street Suite 800 Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Executive Chairman			Employer (See Instructions) Capstar Partners	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hindman, George	Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2100 Greenwood Avenue Austin, TX 78723		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Engineer			Employer (See Instructions) Self	
Date 11/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hopkins, Becky	Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2920 A Windsor Road Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horne, Ed 6 Contributor address; City; State; Zip Code 7143 Valburn Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Investments		10 Employer (See Instructions) Self	
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horne, Elizabeth Contributor address; City; State; Zip Code 7143 Valburn Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horne, Elizabeth Contributor address; City; State; Zip Code 7143 Valburn Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horton, John Contributor address; City; State; Zip Code 3111 Westlake Drive Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudson, Patrick Contributor address; City; State; Zip Code 7105 Beauford Drive Austin, TX 78750	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McLean's & Howard, LLP	

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2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudson, Patrick (Mrs.) 6 Contributor address; City; State; Zip Code 7105 Beauford Drive Austin, TX 78750	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A		
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudspeth, Ann Contributor address; City; State; Zip Code 8010 Stillwood Lane Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Dell		
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hunter, Patricia B. Contributor address; City; State; Zip Code 4100 Jackson Avenue # 431 Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jarvis, Timothy W. Contributor address; City; State; Zip Code 3301 Bridle Path Austin, TX 78703-2711	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Stateside Insurance Services		
Date 11/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jenkins, Bobby Contributor address; City; State; Zip Code 1404 Ethridge Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
Principal occupation / Job title (See Instructions) Service Provider		Employer (See Instructions) ABC Home & Commercial Services		

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Kathy 6 Contributor address; City; State; Zip Code 4105 Shimmering Cove Austin, TX 78731	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Tom Contributor address; City; State; Zip Code 4105 Shimmering Cove Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Associated General Contractors of Texas	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Donna Contributor address; City; State; Zip Code PO Box 5053 Austin, TX 78763	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joseph, Babb Contributor address; City; State; Zip Code 2412 Keating Lane Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kimberlin, Allison Contributor address; City; State; Zip Code PO Box 5930 Austin, TX 78763	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kimberlin, Sam 6 Contributor address; City; State; Zip Code PO Box 5930 Austin, TX 78763	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knight, Betty Contributor address; City; State; Zip Code 307 East 2nd Street Austin, TX 78701	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knight, Elizabeth B. Contributor address; City; State; Zip Code 5608 Jim Hogg Avenue #8 Austin, TX 78756	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knight, Robert Contributor address; City; State; Zip Code 307 East 2nd Street Austin, TX 78701	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Knight Real Estate	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knight, Robert Contributor address; City; State; Zip Code 5608 Jim Hogg Avenue #8 Austin, TX 78756	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Knight Real Estate	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Krause, Sheri 6 Contributor address; City; State; Zip Code 3605 Balcones Austin, TX 78731	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Investor		10 Employer (See Instructions) Self	
Date 11/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kuperman, David Contributor address; City; State; Zip Code 10820 Straw Flower Drive Austin, TX 78733	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Kuperman, Orr, & Albers	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lackey, Doug Contributor address; City; State; Zip Code 2308 Townes Lane Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hawkins Parnell	
Date 12/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lackey, Doug Contributor address; City; State; Zip Code 2308 Townes Lane Austin, TX 78703	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hawkins Parnell	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Langford, David Contributor address; City; State; Zip Code PO Box 1059 Comfort, TX 78713	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lay, John 6 Contributor address; City; State; Zip Code 5309 Tortuga Trail Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions)			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)				
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lay, Larry W. Contributor address; City; State; Zip Code 4603 Cat Mountain Drive Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) CPA			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Faske Lay & Company				
Date 11/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LeBlanc, Ellen Contributor address; City; State; Zip Code 823 Congress Avenue Suite 1111 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Musician			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self				
Date 11/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LeBlanc, Steve Contributor address; City; State; Zip Code 823 Congress Avenue Suite 1111 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Investments			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self				
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ledyard, Kelli Contributor address; City; State; Zip Code 7917 High Hollow Drive Austin, TX 78750	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)				

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2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, John	6 Contributor address; City; State; Zip Code 3839 Bee Caves Road # 204 Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) Self		
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linehan, Paul	Contributor address; City; State; Zip Code 3502 Lost Creek Blvd. Austin, TX 78735	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linehan, Wendy	Contributor address; City; State; Zip Code 3502 Lost Creek Blvd. Austin, TX 78735	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lippiatt, Jerry	Contributor address; City; State; Zip Code 512 Oak Crest Lane Georgetown, TX 78628	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Contractor			Employer (See Instructions) Self		
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Little, Jeanne	Contributor address; City; State; Zip Code 2806 Stratford Drive Austin, TX 78746-2344	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Accountant			Employer (See Instructions) Self		

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Little, Lew 6 Contributor address; City; State; Zip Code 2806 Stratford Drive Austin, TX 78746-2344	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lodwick, Jim Contributor address; City; State; Zip Code 7710 Shadyrock Drive Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lodwick, Pam Contributor address; City; State; Zip Code 7710 Shadyrock Drive Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Quality Assurance		Employer (See Instructions) State of Texas	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loudermilk, Brenda Contributor address; City; State; Zip Code 1604 Cliffwood Drive Austin, TX 78733	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loukas, Demetrius MD Contributor address; City; State; Zip Code 4611 Ridge Oak Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Physian		Employer (See Instructions) Texas Oncology	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loukas, Janis 6 Contributor address; City; State; Zip Code 4611 Ridge Oak Drive Austin, TX 78731	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Homemaker		10 Employer (See Instructions) Self	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Magee, Blake 6 Contributor address; City; State; Zip Code 1409 Kent Lane Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Land Developer		10 Employer (See Instructions) Blake Magee Company, LP	
4 Date 11/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marks, Cindy 6 Contributor address; City; State; Zip Code 6413 Williams Ridge Way Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marks, Michael 6 Contributor address; City; State; Zip Code 6413 Williams Ridge Way Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Flora Tyler 6 Contributor address; City; State; Zip Code 2602 Escondido Cove Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

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2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martine, Carol	7 Amount of contribution (\$) \$350.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 836 Old Spicewood Road Cypress Mill, TX 78663		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See Instructions) Martine Properties, Inc.		
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martine, Tom	Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 836 Old Spicewood Road Cypress Mill, TX 78663		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Martine Properties, Inc.		
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthews, Steve	Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3003 W 35th Street Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self		
Date 10/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matz, Laura	Amount of contribution (\$) \$75.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matz, Ricky	Amount of contribution (\$) \$75.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 39/64 Report: 42/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mays, Mike 6 Contributor address; City; State; Zip Code 5414 Tortuga Trail Austin, TX 78731	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Banker		10 Employer (See Instructions) First State Bank Central Texas	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McHorse, Kay 6 Contributor address; City; State; Zip Code 5503 Ridge Oak Drive Austin, TX 78731	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Piano Teacher		10 Employer (See Instructions) Self	
4 Date 11/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIlhenny, Edmund 6 Contributor address; City; State; Zip Code 3112 Windsor Road # A329 Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) EM Consulting	
4 Date 11/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIlhenny, Pam 6 Contributor address; City; State; Zip Code 3112 Windsor Road # A329 Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
4 Date 11/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKay, Kathleen 6 Contributor address; City; State; Zip Code 11339 Taylor Draper Lane Austin, TX 78759	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		10 Employer (See Instructions) Self	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 40/64 Report: 43/83	
2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKay, Tom	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 11339 Taylor Draper Lane Austin, TX 78759		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Investor		10 Employer (See Instructions) Self		
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McLean, Carlotta	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2402 Rockmoor Avenue Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self		
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McLean, William P.	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2402 Rockmoor Avenue Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McLean & Howard		
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Merritt, Nancy S.	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4200 Jackson Avenue Apt. 1005 Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Metzger, Dean	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8507 Adirondack Cove Austin, TX 78759		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

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The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 41/64 Report: 44/83	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Metzger, Julie	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
6 Contributor address; City; State; Zip Code 8507 Adirondack Cove Austin, TX 78759					
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Lori	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor address; City; State; Zip Code 5656 Bee Caves Road F-201 Austin, TX 78746					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Rip	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor address; City; State; Zip Code 5656 Bee Caves Road F-201 Austin, TX 78746					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 11/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mobley, Ann	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor address; City; State; Zip Code 2801 W. 35th Street Austin, TX 78703					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 11/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mobley, John	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor address; City; State; Zip Code 2801 W. 35th Street Austin, TX 78703					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 42/64 Report: 45/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Monroe, Putnam W. 6 Contributor address; City; State; Zip Code 4705 Balcones Drive Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) More, George Contributor address; City; State; Zip Code 2904 Hillview Road Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) More, Marion Contributor address; City; State; Zip Code 2904 Hillview Road Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morea, Lois Contributor address; City; State; Zip Code 6112 Anemone Cove Austin, TX 78759	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morea, William Contributor address; City; State; Zip Code 6112 Anemone Cove Austin, TX 78759	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 43/64 Report: 46/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Chet 6 Contributor address; City; State; Zip Code 12906 Park Drive Austin, TX 78732	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Tax Consultant		10 Employer (See Instructions) Morrison & Head Tax Consultants	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Jack Jr. Contributor address; City; State; Zip Code 808 Champions Row Victoria, TX 77904	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Joe Contributor address; City; State; Zip Code 100 Lido Circle B-1 Austin, TX 78734	Amount of contribution (\$) \$12.50	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Patricia A. Contributor address; City; State; Zip Code 1804 Rockmoor Avenue Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Suzy Contributor address; City; State; Zip Code 100 Lido Circle B-1 Austin, TX 78734	Amount of contribution (\$) \$12.50	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 44/64 Report: 47/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nash, Jeff 6 Contributor address; City; State; Zip Code 8200 Bell Mountain Drive Austin, TX 78730	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) 3G Partners, LLC	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nash, John H. Contributor address; City; State; Zip Code 5818 Trailridge Drive Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Ellis & Salazar	
Date 11/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nellor, Donald Contributor address; City; State; Zip Code 4024 Walnut Clay Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nellor, Margaret Contributor address; City; State; Zip Code 4024 Walnut Clay Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Environmental Engineer		Employer (See Instructions) Nellor Environmental Engineer	
Date 11/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newberg, Jeff (Mrs.) Contributor address; City; State; Zip Code 3830 Hunterwood Pt Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 45/64 Report: 48/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/19/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newberg, Jeff 6 Contributor address; City; State; Zip Code 3830 Hunterwood Pt Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See Instructions) Endeavor Real Estate	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Niemann, Carol Contributor address; City; State; Zip Code 3301 Greenlee Drive Austin, TX 78703-1527	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Niemann, Larry Contributor address; City; State; Zip Code 3301 Greenlee Drive Austin, TX 78703-1527	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ogden, Chris Contributor address; City; State; Zip Code 4711 Colorado Crossing Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ogden, Katherine Contributor address; City; State; Zip Code 4711 Colorado Crossing Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 46/64 Report: 49/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olbert, Art 6 Contributor address; City; State; Zip Code 1906 Raleigh Avenue Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Flexskill Consulting	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olbert, Diane Contributor address; City; State; Zip Code 1906 Raleigh Avenue Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oles, C. Patrick Jr. Contributor address; City; State; Zip Code 2109 Rockmoor Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Barshop & Oles	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Opalka, Doug Contributor address; City; State; Zip Code 3303 Oakmont Blvd. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) HFF	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Owen, Jack Jr. Contributor address; City; State; Zip Code 43 Palmer Green Place The Woodlands, TX 77381	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 47/64 Report: 50/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parker, Charles 6 Contributor address; City; State; Zip Code 5707 Costas Cove Austin, TX 78759	7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parker, Tazuko Contributor address; City; State; Zip Code 5707 Costas Cove Austin, TX 78759	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pastor, Andrew Contributor address; City; State; Zip Code 2908 Sparkling Brook Lane Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Endeavor	
Date 10/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pastor, Andrew Contributor address; City; State; Zip Code 2908 Sparkling Brook Lane Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Endeavor	
Date 11/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pastor, Andrew Contributor address; City; State; Zip Code 2908 Sparkling Brook Lane Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Endeavor	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 48/64 Report: 51/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pastor, Laura 6 Contributor address; City; State; Zip Code 2908 Sparkling Brook Lane Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penn, Cheryl Contributor address; City; State; Zip Code 1109 Kennan Road Westlake Hills, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions) Raymond James	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penn, Walter Contributor address; City; State; Zip Code 1109 Kennan Road Westlake Hills, TX 78746	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Christopher Contributor address; City; State; Zip Code 2906 Cherry Lane Austin, TX 78703-2822	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Aquila Real Estate	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Edgar (Mrs.) Contributor address; City; State; Zip Code 5905 Overlook Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

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The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 49/64 Report: 52/83	
2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Lauri 6 Contributor address; City; State; Zip Code 2906 Cherry Lane Austin, TX 78703-2822	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A		
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Linda (Mrs.) Contributor address; City; State; Zip Code 5905 Overlook Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pfeiffer, Peter L. Contributor address; City; State; Zip Code 3501 River Road Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 11/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Philips, Rebecca Contributor address; City; State; Zip Code 3504 Hampton Road Austin, TX 78705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pitman, Brian Contributor address; City; State; Zip Code 9600 Bell Mountain Drive Austin, TX 78730	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Independence Title		

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 50/64 Report: 53/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prikryl, Latus 6 Contributor address; City; State; Zip Code 3103 Rivercrest Drive Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Puckett, Margaret Contributor address; City; State; Zip Code 3201 Greenlee Drive Austin, TX 78703	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Puckett, William Contributor address; City; State; Zip Code 3201 Greenlee Drive Austin, TX 78703	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Puett, Caroline Cardwell Contributor address; City; State; Zip Code 108 Bluff Park Circle Austin, TX 78746	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Puett, Nelson Harwood Contributor address; City; State; Zip Code 108 Bluff Park Circle Austin, TX 78746	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Nelson Puett Foundation	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 51/64 Report: 54/83	
2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Putman, Meg 6 Contributor address; City; State; Zip Code 3503 Day Star Cove Austin, TX 78746	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions)			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)				
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Putman, Paul Contributor address; City; State; Zip Code 3503 Day Star Cove Austin, TX 78746	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)				
Date 11/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ream, Scott Contributor address; City; State; Zip Code 7307 Chimney Cove Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Physician			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self				
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reynolds, Ronald Contributor address; City; State; Zip Code 6605 Woodcrest Drive Austin, TX 78759	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) CPA			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Reynolds & Franke, PC				
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roan, Forrest Contributor address; City; State; Zip Code PO Box 27770 Austin, TX 78755	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Attorney			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Roan Law, PLLC				

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 52/64 Report: 55/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, John 6 Contributor address; City; State; Zip Code 8934 Wimberley Cove Austin, TX 78735	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Business		10 Employer (See Instructions) Capitol Services	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roche, David Contributor address; City; State; Zip Code 1600 Mt. Larson Road Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Endeavor Real Estate Group	
Date 11/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose, Patrick Contributor address; City; State; Zip Code 627 W. San Antonio San Marcos, TX 78666	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Corridor Title	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ross, James Contributor address; City; State; Zip Code 8947 Bee Cave Road Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan, Rebekah Contributor address; City; State; Zip Code 4501 Westlake Drive Unit 16 Austin, TX 78746	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 53/64 Report: 56/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 10/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sager, Alan 6 Contributor address; City; State; Zip Code 4205 Greystone Austin, TX 78731	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Entrepreneur		10 Employer (See Instructions) Self	
Date 11/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sager, Alan Contributor address; City; State; Zip Code 4205 Greystone Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self	
Date 10/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sager, Susan Contributor address; City; State; Zip Code 4205 Greystone Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sager, Susan Contributor address; City; State; Zip Code 4205 Greystone Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seeger, Patricia Contributor address; City; State; Zip Code 6705 Winterberry Drive Austin, TX 78750	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 54/64 Report: 57/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Bobby 6 Contributor address; City; State; Zip Code 42 Sundowner Parkway Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Merchant		10 Employer (See Instructions) Austin Pipe & Supplies	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Elaine 6 Contributor address; City; State; Zip Code 1305 Silver Hill Drive Austin, TX 78746	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Jay 6 Contributor address; City; State; Zip Code 1301 Barbara Jordan Blvd. Suite 300 Austin, TX 78723	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Mike 6 Contributor address; City; State; Zip Code 3611 Pinnacle Austin, TX 78746	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Physician		10 Employer (See Instructions) Self	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Morris 6 Contributor address; City; State; Zip Code 1305 Silver Hill Drive Austin, TX 78746	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 55/64 Report: 58/83	
2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Phyllis 6 Contributor address; City; State; Zip Code 42 Sundowner Parkway Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
9 Principal occupation / Job title (See Instructions) Merchant		10 Employer (See Instructions) Austin Pipe & Supplies		
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Susan Contributor address; City; State; Zip Code 1301 Barbara Jordan Blvd. Suite 300 Austin, TX 78723	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simmons, Charles Contributor address; City; State; Zip Code 3111 Glenview Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simmons, Sharon Wilkes Contributor address; City; State; Zip Code 2901 Bowman Avenue Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
Principal occupation / Job title (See Instructions) Owner/Executive		Employer (See Instructions) Swiftex, Inc.		
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skaggs, Betty Contributor address; City; State; Zip Code 4700 Toreador Drive Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>				
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 56/64 Report: 59/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skaggs, James 6 Contributor address; City; State; Zip Code 4700 Toreador Drive Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Marvin Contributor address; City; State; Zip Code 5503 Caprice Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Collection Agent		Employer (See Instructions) Self	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Patricia Contributor address; City; State; Zip Code 5503 Caprice Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Terral R. Contributor address; City; State; Zip Code 6304 Cat Mountain Cove Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Business Consultant		Employer (See Instructions) Self	
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swor, Amanda Contributor address; City; State; Zip Code 2416 Falcon Drive Round Rock, TX 78681	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 57/64 Report: 60/83	
2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taylor, Timothy	7 Amount of contribution (\$) \$350.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1902 Stamford Lane Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Jackson, Walker, LLP		
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taylor, William	Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6407 Mesa Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Teinert, Lois	Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2401 Walsh Drive Round Rock, TX 78681		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) The Perry Company		
Date 11/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Carol	Amount of contribution (\$) \$150.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4301 Cat Mountain Drive Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Business & Healthcare Consultant		Employer (See Instructions) Self		
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Carol	Amount of contribution (\$) \$150.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4301 Cat Mountain Drive Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Business & Healthcare Consultant		Employer (See Instructions) Self		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 58/64 Report: 61/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomson, William K. DDS 6 Contributor address; City; State; Zip Code 801 Cedar Park Drive Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Dentist		10 Employer (See Instructions) Self	
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Bruce Contributor address; City; State; Zip Code 823 Congress Suite 1505 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Travis County	
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van De Graaf, Margaret H. Contributor address; City; State; Zip Code 5315 Valburn Circle Austin, TX 78731-1144	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Osselaer, Paul Contributor address; City; State; Zip Code 2305 Cheswick Court Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self	
Date 11/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vonwolske, Jim Contributor address; City; State; Zip Code 2107 Lakeshore Drive Austin, TX 78746	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 59/64 Report: 62/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 10/31/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Danny 6 Contributor address; City; State; Zip Code 209 Jaydee Terrace Georgetown, TX 78628	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Diana Contributor address; City; State; Zip Code 209 Jaydee Terrace Georgetown, TX 78628	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Dillon Contributor address; City; State; Zip Code 2101 Griswold Lane Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Hospice		Employer (See Instructions) Self	
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Don Contributor address; City; State; Zip Code 4408 Long Champ Drive Unit # 26 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walters, Warren Contributor address; City; State; Zip Code 2918 Ranch Road 620 N Apt 166 Austin, TX 78734	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate Investment		Employer (See Instructions) Simmons Veddar Partners	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 60/64 Report: 63/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watt, Neal Avery 6 Contributor address; City; State; Zip Code 4055 Enclave Mesa Circle Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Welp, Mark Contributor address; City; State; Zip Code 7108 Barefoot Cove Austin, TX 78730	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Business Owner		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self			
Date 12/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Westcott, Chart Contributor address; City; State; Zip Code 100 Crescent Court Suite 1620 Dallas, TX 75201	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Managing Partner		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Commodore Partners			
Date 11/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilburn, Randall Contributor address; City; State; Zip Code 7408 Raincreek Parkway Austin, TX 78759	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self			
Date 11/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wiley, Jay Contributor address; City; State; Zip Code 4221 Canoas Drive Austin, TX 78730	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 62/64 Report: 65/83	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 11/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Windler, Joan 6 Contributor address; City; State; Zip Code 3611 Dali Lane Austin, TX 78703	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 11/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wisser, Eva E. Contributor address; City; State; Zip Code 7117 Foxtree Cove Austin, TX 78750	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wolk, Bob Contributor address; City; State; Zip Code 4904 Backtrail Drive Austin, TX 78731	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Womack, Carolyn Contributor address; City; State; Zip Code 2905 Round Table Road Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 11/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Womack, Eva Contributor address; City; State; Zip Code 4305 Waterford Place Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) N/A			

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gifts/Awards/Memorial Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/16 Report: 68/83		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 11/11/2014	5 Payee name A1 Signs				
6 Amount (\$) \$2,462.69	7 Payee address City; State; Zip Code 111-B N. Bell Blvd. Cedar Park, TX 78613				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard signs		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/26/2014	Payee name Accurate Append				
Amount (\$) \$842.82	Payee address City; State; Zip Code 1511 3rd Avenue # 621 Seattle, WA 98101				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phone bank		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/31/2014	Payee name Accurate Append				
Amount (\$) \$813.12	Payee address City; State; Zip Code 1511 3rd Avenue # 621 Seattle, WA 98101				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phone bank		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 11/17/2014	Payee name BBVA Compass Bank				
Amount (\$) \$3.00	Payee address City; State; Zip Code PO Box 10566 Birmingham, AL 35296				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paper statement fee		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/16 Report: 69/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/07/2014	5 Payee name Chez Zee
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6 Amount (\$) \$25.54	7 Payee address City; State; Zip Code 5406 Balcones Drive Austin, TX 78731
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/09/2014	Payee name Chez Zee
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Amount (\$) \$45.81	Payee address City; State; Zip Code 5406 Balcones Drive Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/26/2014	Payee name Constant Contact
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Amount (\$) \$90.61	Payee address City; State; Zip Code Reservoir Place 1601 Trapelo Road Waltham, MA 02451
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/20/2014	Payee name Constant Contact
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Amount (\$) \$90.61	Payee address City; State; Zip Code Reservoir Place 1601 Trapelo Road Waltham, MA 02451
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/16 Report: 70/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/22/2014	5 Payee name Cox Media Group
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6 Amount (\$) \$475.82	7 Payee address City; State; Zip Code PO Box 645255 Cincinnati, OH 45264
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Polybags <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/28/2014	Payee name Democracy Engine LLC
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Amount (\$) \$23.66	Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/29/2014	Payee name Democracy Engine LLC
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Amount (\$) \$13.32	Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/30/2014	Payee name Democracy Engine LLC
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Amount (\$) \$13.52	Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/16 Report: 71/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 10/31/2014	5 Payee name Democracy Engine LLC
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6 Amount (\$) \$43.16	7 Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/04/2014	Payee name Democracy Engine LLC
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Amount (\$) \$13.32	Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/12/2014	Payee name Democracy Engine LLC
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Amount (\$) \$361.48	Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/19/2014	Payee name Democracy Engine LLC
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Amount (\$) \$429.21	Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/16 Report: 72/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/26/2014	5 Payee name Democracy Engine LLC
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6 Amount (\$) \$299.29	7 Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/03/2014	Payee name Democracy Engine LLC
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Amount (\$) \$137.36	Payee address City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/29/2014	Payee name Dialing Services
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Amount (\$) \$341.88	Payee address City; State; Zip Code PO Box 372421 Denver, CO 80237
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Auto calls <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/05/2014	Payee name Francois Photography
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Amount (\$) \$64.95	Payee address City; State; Zip Code 3801 N. Capital of Texas Hwy. Austin, TX 78746
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photos <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/16 Report: 73/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/04/2014	5 Payee name Google
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6 Amount (\$) \$5.00	7 Payee address City; State; Zip Code Googleplex Mountain View, CA 94043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/02/2014	Payee name Google
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Amount (\$) \$5.00	Payee address City; State; Zip Code Googleplex Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/26/2014	Payee name HEB
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Amount (\$) \$5.23	Payee address City; State; Zip Code 7025 Village Center Drive Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/18/2014	Payee name HEB
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Amount (\$) \$48.77	Payee address City; State; Zip Code 7025 Village Center Drive Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event beverages <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/16 Report: 74/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/12/2014	5 Payee name JCCA
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6 Amount (\$) \$425.00	7 Payee address City: State: Zip Code 7300 Hart Lane Austin, TX 78731
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Jewish Outlook ad <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/31/2014	Payee name KEYE
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Amount (\$) \$484.50	Payee address City: State: Zip Code 10700 Metric Blvd Austin, TX 78758
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/30/2014	Payee name KTBC
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Amount (\$) \$886.55	Payee address City: State: Zip Code 119 East 10th Street Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV Ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2014	Payee name KVUE
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Amount (\$) \$595.00	Payee address City: State: Zip Code 3201 Steck Avenue Austin, TX 78757
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/16 Report: 75/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 10/28/2014	5 Payee name Lily Pad Arts
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6 Amount (\$) \$318.75	7 Payee address City; State; Zip Code 1924 Kempwood Loop Round Rock, TX 78665
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Graphics for mailers <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/29/2014	Payee name Lily Pad Arts
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Amount (\$) \$371.88	Payee address City; State; Zip Code 1924 Kempwood Loop Round Rock, TX 78665
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Graphics for mailing <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/29/2014	Payee name Lily Pad Arts
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Amount (\$) \$265.63	Payee address City; State; Zip Code 1924 Kempwood Loop Round Rock, TX 78665
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Graphics for mailer <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/31/2014	Payee name LiN Television Sales
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Amount (\$) \$646.00	Payee address City; State; Zip Code 908 W MLK Blvd. Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/16 Report: 76/83		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 10/31/2014		5 Payee name LiN Television Sales			
6 Amount (\$) \$488.75		7 Payee address City; State; Zip Code 908 W MLK Blvd. Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/31/2014		Payee name LiN Television Sales			
Amount (\$) \$204.00		Payee address City; State; Zip Code 908 W MLK Blvd. Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/27/2014		Payee name Lone Star Directions			
Amount (\$) \$3,245.00		Payee address City; State; Zip Code 403 Dawson Street # 5 San Antonio, TX 78202			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ad <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/29/2014		Payee name Nation Builder			
Amount (\$) \$19.00		Payee address City; State; Zip Code 448 S. Hill Street Los Angeles, CA 90013			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/16 Report: 77/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/29/2014	5 Payee name Nation Builder
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6 Amount (\$) \$29.00	7 Payee address City; State; Zip Code 448 S. Hill Street Los Angeles, CA 90013
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2014	Payee name Office Depot
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Amount (\$) \$54.10	Payee address City; State; Zip Code 2620 W. Anderson Lane Austin, TX 78757
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9 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2014	Payee name Office Depot
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Amount (\$) \$94.77	Payee address City; State; Zip Code 2620 W. Anderson Lane Austin, TX 78757
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10 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/29/2014	Payee name Olvero, Lisbete
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Amount (\$) \$500.00	Payee address City; State; Zip Code 2121 Burton # 1058 Austin, TX 78741
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11 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/16 Report: 78/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 10/27/2014	5 Payee name Paragon Printing
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6 Amount (\$) \$293.96	7 Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/27/2014	Payee name Paragon Printing
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Amount (\$) \$155.25	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/20/2014	Payee name Paragon Printing
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Amount (\$) \$1,068.14	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/26/2014	Payee name Paragon Printing
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Amount (\$) \$2,422.67	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/16 Report: 79/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 12/04/2014	5 Payee name Paragon Printing
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6 Amount (\$) \$4,544.97	7 Payee address City; State; Zip Code 10423 McKalla Place Austin, TX 78758
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/26/2014	Payee name Southwest Precision Printers
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Amount (\$) \$5,148.52	Payee address City; State; Zip Code 1055 Conrad Sauer Houston, TX 77043
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/12/2014	Payee name Spicewood Tavern
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Amount (\$) \$29.90	Payee address City; State; Zip Code 8127 Mesa Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/27/2014	Payee name The Whitley Group
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Amount (\$) \$1,822.81	Payee address City; State; Zip Code 4129 Commercial Center Drive # 400 Austin, TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postcards <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 13/16 Report: 80/83		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 10/28/2014		5 Payee name The Whitley Group			
6 Amount (\$) \$1,557.04		7 Payee address City; State; Zip Code 4129 Commercial Center Drive # 400 Austin, TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing & postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/20/2014		Payee name Thompson, Kathryn			
Amount (\$) \$450.00		Payee address City; State; Zip Code 12700 Cloud Mountain Crossing Austin, TX 78726			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/27/2014		Payee name Time Warner Cable			
Amount (\$) \$1,640.50		Payee address City; State; Zip Code 10801 N. Mopac Expressway Bldg. 1, Suite 300 Austin, TX 78759			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/31/2014		Payee name Time Warner Cable			
Amount (\$) \$783.70		Payee address City; State; Zip Code 10801 N. Mopac Expressway Bldg. 1, Suite 300 Austin, TX 78759			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 14/16 Report: 81/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/03/2014	5 Payee name Time Warner Cable
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6 Amount (\$) \$603.50	7 Payee address City; State; Zip Code 10801 N. Mopac Expressway Bldg. 1, Suite 300 Austin, TX 78759
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/20/2014	Payee name Troy
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Amount (\$) \$25.85	Payee address City; State; Zip Code 8105 Mesa Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/27/2014	Payee name US Post Office Chimney Corners Station
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Amount (\$) \$880.67	Payee address City; State; Zip Code 3575 Far West Blvd. Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/27/2014	Payee name US Post Office Chimney Corners Station
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Amount (\$) \$136.00	Payee address City; State; Zip Code 3575 Far West Blvd. Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 15/16 Report: 82/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/01/2014	5 Payee name US Post Office Chimney Corners Station
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6 Amount (\$) \$64.00	7 Payee address City; State; Zip Code 3575 Far West Blvd. Austin, TX 78731
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Post office box rental <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/20/2014	Payee name US Post Office Chimney Corners Station
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Amount (\$) \$785.85	Payee address City; State; Zip Code 3575 Far West Blvd. Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/26/2014	Payee name US Post Office Chimney Corners Station
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Amount (\$) \$4,401.25	Payee address City; State; Zip Code 3575 Far West Blvd. Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/04/2014	Payee name US Post Office Chimney Corners Station
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Amount (\$) \$4,754.62	Payee address City; State; Zip Code 3575 Far West Blvd. Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 16/16 Report: 83/83	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 11/02/2014	5 Payee name UT Parking Garage
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6 Amount (\$) \$9.00	7 Payee address City; State; Zip Code 210 E. MLK Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Forum parking <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/11/2014	Payee name Waterloo Ice House
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Amount (\$) \$19.78	Payee address City; State; Zip Code 6203 N. Capital of Texas Highway Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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